

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

2018 MAY -9 PM 5:29

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|   |                    |   |  |
|---|--------------------|---|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Bob Casey for Senate Inc   |                    |   |  |
| <b>ADDRESS</b> (number and street) PO Box 58746   |                    |   |  |
| <b>CITY</b><br>Philadelphia   | <b>STATE</b><br>PA | <b>ZIP CODE</b><br>19102                                  |  |
| <b>2. NAME OF CANDIDATE</b><br>Casey, Robert, P., Jr.   |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>Senate PA | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00431056   |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |                    |   |  |
| <b>A. FULL NAME</b><br>Berger, Bruce, N., ,   |                    |   |  |
| <b>MAILING ADDRESS</b><br>PO Box 482  |                    | <b>Name of Employer</b><br>Self Employed                  | <b>Date (month, day, year)</b><br>05/07/2018   |
| <b>CITY</b><br>Aspen  | <b>STATE</b><br>CO | <b>ZIP CODE</b><br>81612-0482                             | <b>Amount</b><br>1700.00   |
| <b>Transaction ID : VNVWKFTW1C0</b>   |                    | <b>Occupation</b><br>Writer                               |  |
| <b>B. FULL NAME</b><br>National Association of Retired Federal Employees  |                    |   |  |
| <b>MAILING ADDRESS</b><br>606 N Washington St   |                    | <b>Name of Employer</b>                                   | <b>Date (month, day, year)</b><br>05/07/2018   |
| <b>CITY</b><br>Alexandria   | <b>STATE</b><br>VA | <b>ZIP CODE</b><br>22314-1914                             | <b>Amount</b><br>1500.00   |
| <b>Transaction ID : VNVWKFTMQV0</b>   |                    | <b>Occupation</b>   |  |
| <b>C. FULL NAME</b><br>Powell, Mark, J.,  |                    |   |  |
| <b>MAILING ADDRESS</b><br>219 Salingers Close   |                    | <b>Name of Employer</b><br>Powell Law Firm                | <b>Date (month, day, year)</b><br>05/07/2018   |
| <b>CITY</b><br>Moosic   | <b>STATE</b><br>PA | <b>ZIP CODE</b><br>18507-1912                             | <b>Amount</b><br>1000.00   |
| <b>Transaction ID : VNVWKFTMQH1</b>   |                    | <b>Occupation</b><br>Attorney                             |  |
| <b>D. FULL NAME</b><br>American College of Rheumatology PAC   |                    |   |  |
| <b>MAILING ADDRESS</b><br>2200 Lake Blvd NE   |                    | <b>Name of Employer</b>                                   | <b>Date (month, day, year)</b><br>05/07/2018   |
| <b>CITY</b><br>Brookhaven   | <b>STATE</b><br>GA | <b>ZIP CODE</b><br>30319-5310                             | <b>Amount</b><br>5000.00   |
| <b>Transaction ID : VNVWKFTMQZ1</b>   |                    | <b>Occupation</b>   |  |
| <b>E. FULL NAME</b><br>American Hospital Association PAC  |                    |   |  |
| <b>MAILING ADDRESS</b><br>325 7th St NW<br>Ste 700  |                    | <b>Name of Employer</b>                                   | <b>Date (month, day, year)</b><br>05/07/2018   |
| <b>CITY</b><br>Washington   | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20004-2801                             | <b>Amount</b><br>2000.00   |
| <b>Transaction ID : VNVWKFTMQT2</b>   |                    | <b>Occupation</b>   |  |
| <b>SIGNATURE (optional)</b><br>Lyons, Charles.  |                    | <b>DATE</b><br>05/08/2018                                 | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

**FEC FORM 6**  
(Revised 03/2016)

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| <b>1. NAME OF COMMITTEE IN FULL</b><br>Bob Casey for Senate Inc  |  |  |  |
| <b>ADDRESS (number and street)</b> PO Box 58746  |  |  |  |
| <b>CITY, STATE, and ZIP CODE</b><br>Philadelphia PA 19102  |  |  |  |
| <b>2. NAME OF CANDIDATE</b><br>Casey, Robert, P., Jr.  |  | <b>3. OFFICE SOUGHT (State and District)</b><br>Senate PA  |  |
|  |  | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00431056   |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |  |  |
| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>  |  |  |  |
| Mundy, James, F.,<br>527 Linden St<br>Scranton, pa<br>Scranton PA 18503-1605   |  | Name of Employer<br>Powell Law Firm<br>Date (month, day, year)<br>05/07/2018<br>Amount<br>2500.00<br>Transaction ID : VNVWKFTMQG3<br>Occupation<br>Attorney      |  |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>  |  |  |  |
| American Academy of Neurology<br>401 C St NE<br>Washington DC 20002-5817   |  | Name of Employer<br>Date (month, day, year)<br>05/07/2018<br>Amount<br>1000.00<br>Transaction ID : VNVWKFTMQY4<br>Occupation                                     |  |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>  |  |  |  |
| Toth, Jerome, E.,<br>115 Township Line Rd<br>Exton PA 19341-2103   |  | Name of Employer<br>Thermacore, Inc.<br>Date (month, day, year)<br>05/07/2018<br>Amount<br>1000.00<br>Transaction ID : VNVWKFTW1E5<br>Occupation<br>President    |  |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>  |  |  |  |
| O'Hara, James, T., , Sr.<br>205 Old School House Rd<br>Covington Township PA 18444-7856  |  | Name of Employer<br>James T. O'Hara Company<br>Date (month, day, year)<br>05/07/2018<br>Amount<br>1000.00<br>Transaction ID : VNVWKFTMQF5<br>Occupation<br>Owner |  |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>  |  |  |  |
| American Podiatric Medical Association Political Action Committee<br>9312 Old Georgetown Rd<br>Bethesda MD 20814-1698  |  | Name of Employer<br>Date (month, day, year)<br>05/07/2018<br>Amount<br>1000.00<br>Transaction ID : VNVWKFTMQX6<br>Occupation                                     |  |

continuation page

PAGE 3 / 3

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| ADDRESS (number and street) PO Box 58746  |  |  |                   |
| CITY, STATE, and ZIP CODE<br>Philadelphia PA 19102  |  |  |                   |
| 2. NAME OF CANDIDATE<br>Casey, Robert, P, , Jr.   |  | 3. OFFICE SOUGHT (State and District)<br>Senate PA |                   |
| 4. FEC IDENTIFICATION NUMBER<br>C00431056   |  |  |                   |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |  |                   |
| continuation page   |  |  |                   |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Doran, Thomas, E, , Esquire<br>210 Pheasant Run Rd<br>West Chester PA 19380-6647  |  |  |                   |
| Name of Employer<br>Not Employed  |  | Date (month, day, year)<br>05/07/2018              | Amount<br>1200.00 |
| Transaction ID : VNVWKFTW1D7<br>Occupation<br>Retired   |  |  |                   |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Senior Care Pharmacy Coalition PAC<br>1700 Pennsylvania Ave NW<br>Ste 200<br>Washington DC 20006-4707                     |  |  |                   |
| Name of Employer  |  | Date (month, day, year)<br>05/07/2018              | Amount<br>5000.00 |
| Transaction ID : VNVWKFTMQW8<br>Occupation  |  |  |                   |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Berger, Bruce, N.,<br>PO Box 482<br>Aspen CO 81612-0482   |  |  |                   |
| Name of Employer<br>Self Employed   |  | Date (month, day, year)<br>05/07/2018              | Amount<br>1000.00 |
| Transaction ID : VNVWKFTWCE9<br>Occupation<br>Writer  |  |  |                   |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE  |  |  |                   |
| Name of Employer  |  | Date (month, day, year)                            | Amount            |
| Occupation  |  |  |                   |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE  |  |  |                   |
| Name of Employer  |  | Date (month, day, year)                            | Amount            |
| Occupation  |  |  |                   |

201805090200366397

# Fax Transmission

**To:** Secretary of the Senate

**Fax:** 12022241851

**RE:** Bob Casey for Senate Inc 48 Hour Report

**From:** Mele Brengarth & Associates LLC

**Date:** 5/9/2018 2:15:03 PM PDT

**Pages:** 4

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2018 MAY 09 PM 5:29

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## Comments:

Secretary of the Senate  
Office of Public Records  
PO Box 77578  
Washington, DC 20013-7578

May 9, 2018

Re: Bob Casey for Senate Inc. 48 Hour Report covering 05/74/2018 FEC ID No. C00431056

To Whom It May Concern:

Enclosed is the 48 hour report on behalf of Bob Casey for Senate Inc.

Sincerely,

Charles Lyons  
Treasurer  
Bob Casey for Senate Inc  
Office phone: (202) 552-0221  
Fax: (202) 207-9675

201805090200366398

Faxed  
or  
Hand Delivered

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

## OVERNIGHT DELIVERY SERVICE:

|                  | SHIPPING DATE | NEXT BUSINESS DAY DELIVERY |
|------------------|---------------|----------------------------|
| FEDERAL EXPRESS  | _____         | <input type="checkbox"/>   |
| UPS              | _____         | <input type="checkbox"/>   |
| DHL              | _____         | <input type="checkbox"/>   |
| AIRBORNE EXPRESS | _____         | <input type="checkbox"/>   |

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

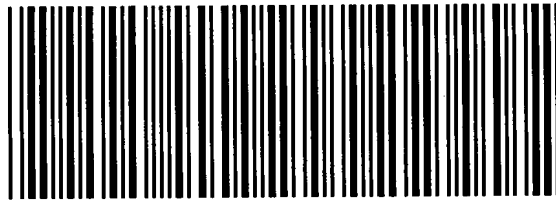
POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX 5-9-18  
Date of Receipt

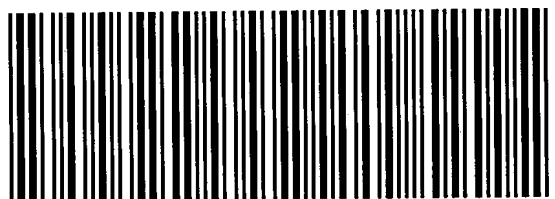
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 5-9-18

201805090200366400



SEN PATCH



SEN PATCH

201805090200366401